| Fill in this information to identify your case:  |                                 |                                 |
|--|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:          |                                 |                                 |
| EASTERN DISTRICT OF MISSOURI, ST. LOUIS DIVISION | _                               |                                 |
| Case number (if known)                           | _ Chapter you are filing under: |                                 |
|  | ☐ Chapter 7                     |                                 |
|  | ☐ Chapter 11                    |                                 |
|  | ☐ Chapter 12                    |                                 |
|  | Chapter 13                      | Check if this an amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself  |   |                      |                            |
|----|--|---|----------------------|----------------------------|
|    |  | About Debtor 1:                                   | About Debtor 2 (Spo  | use Only in a Joint Case): |
| 1. | Your full name   |   |                      |                            |
|    | Write the name that is on your government-issued picture identification (for example, your driver's                              | Kara<br>First name                                | First name           |                            |
|    | license or passport).  | Middle name                                       | Middle name          |                            |
|    | Bring your picture identification to your meetin with the trustee.   | Fauss  9 Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix | (Sr., Jr., II, III)        |
| 2. | All other names you have used in the last 8 years  |   |                      |                            |
|    | Include your married or maiden names.  |   |                      |                            |
| 3. | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-6526                                       |                      |                            |

Debtor 1 Fauss, Kara Pg 2 of 37 Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)  |
|    |  | EINs  | EINs  |
| 5. | Where you live   | 1412 Heritage Valley Dr   | If Debtor 2 lives at a different address:   |
|    |  | High Ridge, MO 63049-1166  Number, Street, City, State & ZIP Code  St. Louis  | Number, Street, City, State & ZIP Code  |
|    |  | County  | County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
|    |  |   |   |

Debtor 1 Fauss, Kara Pg 3 of 37 Case number (if known)

| 7.           | The chapter of the Bankruptcy Code you are  |               |                                | rief description of each, see <i>l</i> ne top of page 1 and check the |                               |   | . § 342(b) for Individuals Filing t  | or Bankruptcy (Forn      |
|--------------|---|---------------|--------------------------------|---|-------------------------------|---|--|--------------------------|
|              | choosing to file under  | ☐ Chap        | oter 7                         |   |                               |   |  |                          |
|              |   | ☐ Chap        | oter 11                        |   |                               |   |  |                          |
|              |   | ☐ Chap        | oter 12                        |   |                               |   |  |                          |
|              |   | ■ Chap        | oter 13                        |   |                               |   |  |                          |
| 8.           | How you will pay the fee  | — ab          | out how you                    | n may pay. Typically, if you ar<br>y is submitting your payment       | e paying the                  | e fee yourself, you                       | e clerk's office in your local coul<br>I may pay with cash, cashier's c<br>may pay with a credit card or cl                | heck, or money orde      |
|              |   | ☐ In          | eed to pay                     | the fee in installments. If y   |                               | this option, sign a                       | and attach the Application for Inc   | dividuals to Pay The     |
|              |   |               | Ū                              | nstallments (Official Form 10   | ,                             | Marian Carana I. Kar                      | over the first of the Objection 7. De la   |                          |
|              |   | nc<br>yo      | t required to<br>ur family siz | o, waive your fee, and may do   | so only if y<br>the fee in in | our income is less<br>stallments). If you | ou are filing for Chapter 7. By last than 150% of the official pover choose this option, you must filt with your petition. | rty line that applies to |
| ).           | Have you filed for bankruptcy within the last   | ■ No.         |                                |   |                               |   |  |                          |
|              | 8 years?  | ☐ Yes.        |                                |   |                               |   |  |                          |
|              |   |               | District                       |   | When                          |   | Case number  |                          |
|              |   |               | District                       |   | When                          |   | Case number  |                          |
|              |   |               | District                       |   | When                          |   | Case number  |                          |
| I <b>0</b> . | Are any bankruptcy cases pending or being filed by  | □No           |                                |   |                               |   |  |                          |
|              | a spouse who is not filing<br>this case with you, or by<br>a business partner, or by<br>an affiliate? | ■ Yes.        |                                |   |                               |   |  |                          |
|              |   |               | Debtor                         | Jason Fauss   |                               |   | Relationship to you  | Spouse                   |
|              |   |               | District                       | Eastern District of Missouri  | When                          | 5/25/13                                   | Case number, if known  | 13-42530                 |
|              |   |               | Debtor                         |   |                               |   | Relationship to you  |                          |
|              |   |               | District                       |   | When                          |   | Case number, if known  |                          |
| 1.           | Do you rent your  | ■ No.         | Go to li                       | ne 12.  |                               |   |  |                          |
|              | residence?  | ☐ Yes.        | Has voi                        | ur landlord obtained an eviction                                      | on judamen                    | t against vou and                         | do you want to stay in your resi   | dence?                   |
|              |   | <b>—</b> 103. |                                | No. Go to line 12.  | ,                             | J ,                                       | ,  |                          |
|              |   |               |                                |   |                               |   | t Against You (Form 101A) and  | Letter to a table at the |

Debtor 1 Fauss, Kara Pg 4 of 37 Case number (if known)

| Par | Report About Any Bus  | sinesses \             | You Own as          | a Sole Proprietor                        | •  |
|-----|---|------------------------|---------------------|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business?   | □ No.                  | Go to Pa            | art 4.                                   |  |
|     |   | Yes.                   | Name a              | nd location of busir                     | ness   |
|     | A sole proprietorship is a business you operate as an   |                        |                     | Consulting                               |  |
|     | individual, and is not a separate legal entity such as a corporation, partnership,                                |                        | Name of             | business, if any                         |  |
|     | or LLC.   |                        |                     | eritage Valley [                         |  |
|     | If you have more than one sole proprietorship, use a  |                        | _                   | didge, MO 63049<br>, Street, City, State |  |
|     | separate sheet and attach it to this petition.  |                        |                     | •  | to describe your business:   |
|     | to this petition.   |                        |                     |  | iss (as defined in 11 U.S.C. § 101(27A))   |
|     |   |                        | _                   |  | Estate (as defined in 11 U.S.C. § 101(51B))  |
|     |   |                        | <u>—</u>            | -  | rined in 11 U.S.C. § 101(53A))   |
|     |   |                        | _                   | •  | (as defined in 11 U.S.C. § 101(6))   |
|     |   |                        | _                   | None of the above                        | (*** **********************************  |
|     |   |                        | _                   |  |  |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?           | deadlines<br>operation | s. If you indic     | ate that you are a s                     | urt must know whether you are a small business debtor so that it can set appropriate mall business debtor, you must attach your most recent balance sheet, statement of eral income tax return or if any of these documents do not exist, follow the procedure in 11 |
|     |   | ■ No.                  | I am not            | filing under Chapte                      | er 11.   |
|     | For a definition of small business debtor, see 11 U.S.C. § 101(51D).  | □ No.                  | I am filir<br>Code. | ng under Chapter 1                       | 1, but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|     |   | ☐ Yes.                 | I am filir          | ng under Chapter 1                       | 1 and I am a small business debtor according to the definition in the Bankruptcy Code.   |
| Par | t 4: Report if You Own or   | Have Any               | Hazardous           | Property or Any I                        | Property That Needs Immediate Attention  |
| 14. | Do you own or have any  | ■ No.                  |                     |  |  |
|     | property that poses or is alleged to pose a threat of   |                        |                     |  |  |
|     | imminent and identifiable   | ⊔ Yes.                 | What is the         | e hazard?                                |  |
|     | hazard to public health or safety? Or do you own  |                        |                     |  |  |
|     | any property that needs immediate attention?  |                        |                     | te attention is<br>ny is it needed?      |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? |                        | Where is the        | ne property?                             | Number Circuit City Chata 9 7% Onde  |
|     |   |                        |                     |  | Number, Street, City, State & Zip Code   |

Debtor 1 Fauss, Kara Pg 5 of 37 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Fauss, Kara Pg 6 of 37 Case number (if known)

| Par | 6: Answer These Question   | ons for Re               | porting Purposes  |                                     |                         |  |
|-----|--|--------------------------|---|-------------------------------------|-------------------------|--|
| 16. | What kind of debts do you have?  | 16a.                     | Are your debts primarily consuindividual primarily for a personal,          |                                     |                         | in 11 U.S.C.§ 101(8) as "incurred by an  |
|     |  |                          | ☐ No. Go to line 16b.   |                                     |                         |  |
|     |  |                          | Yes. Go to line 17.   |                                     |                         |  |
|     |  | 16b.                     | Are your debts primarily busin for a business or investment or th           |                                     |                         |  |
|     |  |                          | ☐ No. Go to line 16c.   |                                     |                         |  |
|     |  |                          | ☐ Yes. Go to line 17.   |                                     |                         |  |
|     |  | 16c.                     | State the type of debts you owe th  | nat are not consumer                | debts or business deb   | ots  |
| 17. | Are you filing under<br>Chapter 7?   | ■ No.                    | I am not filing under Chapter 7. C  | Go to line 18.                      |                         |  |
|     | Do you estimate that after any exempt property is excluded and                 | ☐ Yes.                   | I am filing under Chapter 7. Do yo paid that funds will be available to     |                                     |                         | excluded and administrative expenses are   |
|     | administrative expenses  |                          | □ No  |                                     |                         |  |
|     | are paid that funds will be available for distribution to unsecured creditors? |                          | ☐ Yes   |                                     |                         |  |
| 18. | How many Creditors do  | <b>1</b> -49             |   | <b>1</b> ,000-5,000                 |                         | <b>2</b> 5,001-50,000  |
|     | you estimate that you owe?   | □ 50-99                  |   | ☐ 5001-10,000                       |                         | <b>5</b> 0,001-100,000   |
|     |  | 100-19                   |   | <b>1</b> 0,001-25,00                | 0                       | ☐ More than100,000   |
|     |  | 200-99                   | 99  |                                     |                         |  |
| 19. | How much do you  | □ \$0 - \$5              |   | □ \$1,000,001 -                     |                         | ☐ \$500,000,001 - \$1 billion  |
|     | estimate your assets to be worth?  |                          | 01 - \$100,000  | \$10,000,001                        |                         | □ \$1,000,000,001 - \$10 billion   |
|     |  | _                        | 001 - \$500,000<br>001 - \$1 million  | □ \$50,000,001 · □ \$100,000,001    |                         | ☐ \$10,000,000,001 - \$50 billion<br>☐ More than \$50 billion                      |
| 20  | How much do you  |                          | 70.000  | П ¢4 000 004                        | Φ4.0:II:                | П фгоо ооо оод - фд h::::  |
| 20. | estimate your liabilities to   | □ \$0 - \$5<br>□ \$50.00 | 01 - \$100,000  | □ \$1,000,001 -<br>□ \$10,000,001 - |                         | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion                     |
|     | be?  |                          | 01 - \$500,000  | \$50,000,001                        |                         | □ \$10,000,000,001 - \$50 billion  |
|     |  |                          | 01 - \$1 million  | □ \$100,000,001                     | - \$500 million         | ☐ More than \$50 billion   |
| Par | 7: Sign Below  |                          |   |                                     |                         |  |
| For | you  | I have exa               | mined this petition, and I declare u  | under penalty of perju              | ry that the information | provided is true and correct.  |
|     |  |                          | hosen to file under Chapter 7, I a<br>de. I understand the relief available |                                     |                         | der Chapter 7, 11,12, or 13 of title 11, Unitedeed under Chapter 7.                |
|     |  |                          | ney represents me and I did not pa<br>ined and read the notice required b   |                                     |                         | torney to help me fill out this document, I  |
|     |  | I request                | relief in accordance with the chap  | oter of title 11, United            | States Code, specifie   | ed in this petition.   |
|     |  |                          | result in fines up to \$250,000, or in                                      |                                     |                         | erty by fraud in connection with a bankruptcy U.S.C. §§ 152, 1341, 1519, and 3571. |
|     |  | Kara Fa                  |   |                                     | Signature of Debtor 2   |  |
|     |  | Executed                 | on March 20, 2017   |                                     | Executed on             |  |
|     |  |                          | MM / DD / YYYY  |                                     | MM / [                  | DD / YYYY  |

Debtor 1 Fauss, Kara Pg 7 of 37 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jason Fauss                        | Date          | March 20, 2017     |
|--|---------------|--------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY     |
| Jason Fauss                            |               |                    |
| Printed name                           |               |                    |
| Jason D. Fauss - Attorney at Law       |               |                    |
| Firm name                              |               |                    |
|  |               |                    |
| 11965 Saint Charles Rock Rd Ste 202    |               |                    |
| Bridgeton, MO 63044-2628               |               |                    |
| Number, Street, City, State & ZIP Code |               |                    |
| Contact phone (314) 291-8899           | Email address | jason@fausslaw.com |
| 57734 MO                               |               | <u></u>            |
| Par number 9 Ctate                     |               |                    |

| nation to identify your  | case:                            | Pg 8 of 37                                     |   |   |
|--------------------------|----------------------------------|--|---|---|
| Kara Fauss               |                                  |  |   |   |
| First Name               | Middle Name                      | Last Name                                      | }   |   |
|                          |                                  |  |   |   |
| First Name               | Middle Name                      | Last Name                                      | _   |   |
| inkruptcy Court for the: | EASTERN DISTRICT C               | OF MISSOURI, ST. LOUIS D                       | IVISION   |   |
|                          |                                  |  |   | ☐ Check if this is an amended filing  |
|                          | Kara Fauss First Name First Name | First Name Middle Name  First Name Middle Name | Mara Fauss First Name Middle Name Last Name  First Name Middle Name Last Name | Mara Fauss First Name Middle Name Last Name  First Name Middle Name Last Name |

# Official Form 106Sum

# **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets  |              |                           |
|----|---|--------------|---------------------------|
|    |   | Your a       | essets<br>of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$           | 205,000.00                |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$           | 141,587.80                |
|    | 1c. Copy line 63, Total of all property on Schedule A/B   | \$           | 346,587.80                |
| Ра | t 2: Summarize Your Liabilities   |              |                           |
|    |   |              | iabilities<br>It you owe  |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D            | \$           | 420,398.08                |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F                                      | \$           | 0.00                      |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j @Schedule E/F   | \$           | 9,200.00                  |
|    | Your total liabilities  | \$           | 429,598.08                |
| Pa | t 3: Summarize Your Income and Expenses   |              |                           |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I  | \$           | 0.00                      |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$           | 2,542.00                  |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records  |              |                           |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.                      | ner schedu   | ıles.                     |
| 7. | ■ Yes What kind of debt do you have?  |              |                           |
|    | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | ersonal, far | mily, or household        |

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

Debtor 1 Fauss, Kara Pg 9 of 37 Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |    |
|--|-------------|----|
| From Part 4 on Schedule E/F, copy the following:   |             |    |
| 9a. Domestic support obligations (Copy line 6a.)   | \$0.0       | 10 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$0.0       | 10 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$0.0       | 0  |
| 9d. Student loans. (Copy line 6f.)   | \$0.0       | 0  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0  |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$0.00      |    |

|   | Kara Fauss   | I- Nam-   |   |
|---|--|---|---|
| ebtor 2   | First Name Middl   | le Name Last Name   | :   |
| oouse, if filing)                               | First Name Middl   | le Name Last Name   |   |
| nited States Ba                                 | ankruptcy Court for the: _EASTERN  | I DISTRICT OF MISSOURI, ST. LOUIS DIV   | /ISION  |
| ase number                                      |  |   | ☐ Check if this is a  |
|   |  |   | amended filing  |
| fficial Fo                                      | orm 106A/B   |   |   |
|   | le A/B: Property   |   | 12/15   |
| nk it fits best. I                              | Be as complete and accurate as possible<br>re space is needed, attach a separate s | le. If two married people are filing together, bot  | an one category, list the asset in the category where you oth are equally responsible for supplying correct pages, write your name and case number (if known).  |
| rt 1: Describe                                  | Each Residence, Building, Land, or Of  | ther Real Estate You Own or Have an Interest I  | ln .  |
| Oo you own or                                   | have any legal or equitable interest in a  | any residence, building, land, or similar proper  | rty?  |
| ☐ No. Go to Pa                                  | urt 2.   |   |   |
| Yes. Where                                      | is the property?   |   |   |
|   |  |   |   |
|   |  |   |   |
|   |  | What is the property? Check all that apply  |   |
|   |  | What is the property? Check all that apply  Single-family home  | Do not deduct secured claims or exemptions. But   |
| 1412 Her  | itage Valley Dr  | Single-family home  | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :   |
| 1412 Her  | itage Valley Dr<br>s, if available, or other description                           |   |   |
| 1412 Her Street address                         | s, if available, or other description  | Single-family home  Duplex or multi-unit building  Condominium or cooperative   | the amount of any secured claims on Schedule D:   |
| 1412 Her Street address                         | s, if available, or other description ge MO 63049-1166                             | Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own?  |
| 1412 Her Street address                         | s, if available, or other description  | Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$410,000.00  \$205,000.00   |
| 1412 Her Street address                         | s, if available, or other description ge MO 63049-1166                             | Single-family home  Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home  Land Investment property   | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own?  |
| 1412 Her Street address                         | s, if available, or other description ge MO 63049-1166                             | Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  Who has an interest in the property? Check   | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$\frac{\\$410,000.00}{\}\$205,000.00}  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  |
| 1412 Her Street address High Rid                | ge MO 63049-1166  State ZIP Code   | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check  | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$\frac{410,000.00}{205,000.0}\$  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or the content of the property?   |
| 1412 Her Street address                         | ge MO 63049-1166  State ZIP Code   | Single-family home  Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other  Who has an interest in the property? Check Debtor 1 only Debtor 2 only   | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$\frac{\\$410,000.00}{\}205,000.0}  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.   |
| 1412 Her Street address High Rid City St. Louis | ge MO 63049-1166  State ZIP Code   | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check  | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$410,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  Tenancy by the Entirety  Check if this is community property  |
| High Rid  | ge MO 63049-1166  State ZIP Code   | Single-family home  Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other  Who has an interest in the property? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$410,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  Tenancy by the Entirety  Check if this is community property (see instructions)                           |
| 1412 Her Street address High Rid City St. Louis | ge MO 63049-1166  State ZIP Code   | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$410,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  Tenancy by the Entirety  Check if this is community property (see instructions)                           |
| 1412 Her Street address High Rid City St. Louis | ge MO 63049-1166  State ZIP Code   | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about the property identification number: | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$410,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, o a life estate), if known.  Tenancy by the Entirety  Check if this is community property (see instructions)                            |
| High Rid City  St. Louis County                 | ge MO 63049-1166  State ZIP Code   | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about the property identification number: | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  \$410,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, of a life estate), if known.  Tenancy by the Entirety  Check if this is community property (see instructions)  this item, such as local |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case number (if known)

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Hyundai Who has an interest in the property? Check one 3.1 Make: the amount of any secured claims on Schedule D: Santa Fe Model: Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2012 Debtor 2 only Current value of the Current value of the Approximate mileage: 129000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$5,600.00 \$5,600.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Toyota** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Sienna Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Year. 2009 Debtor 2 only Current value of the Current value of the 145000 portion you own? entire property? Approximate mileage: Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$6.800.00 \$3,400.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$9.000.00 you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$2,500.00 Misc. household goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Yes. Describe..... Misc. household electronics \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe.....

Debtor 1

Fauss, Kara

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Pg 12 of 37 Case number (if known)

| Deb             | otor 1                   | Fauss, Kara  |            |                               | Pg 12 of 37  | Case number (if known)         |   |
|-----------------|--------------------------|--|------------|-------------------------------|--|--------------------------------|---|
| 1               | Example:                 | nt for sports ar<br>s: Sports, photog<br>instruments |            |                               | quipment; bicycles, pool tables,                                   | golf clubs, skis; canoes and l | kayaks; carpentry tools; musical  |
| _               | ■ No<br>□ Yes. [         | Describe   |            |                               |  |                                |   |
| 10.             | Firearms                 |  |            |                               |  |                                |   |
|                 | No                       | les: Pistols, rifles                                 | s, shotgur | s, ammunition, and related    | d equipment  |                                |   |
| 11.             | Clothes                  |  | thes, furs | , leather coats, designer we  | ear, shoes, accessories  |                                |   |
| ı               | Yes. [                   | Describe   |            |                               |  |                                | <b>*</b> 250.00   |
|                 |                          |  | Used       | clothing                      |  |                                | \$350.00  |
| [               | □ No ´                   | es: Everyday jew                                     | ,          |                               | ings, wedding rings, heirloom jo                                   | ewelry, watches, gems, gold, s |   |
|                 |                          |  | Misc.      | Jewelry                       |  |                                | \$2,500.00  |
| 14.<br><b>I</b> | Any othe<br>No<br>Yes. ( | Give specific info                                   | ormation   |                               | eady list, including any healt                                     |                                | \$5,850.00  |
| Par             | t 4: Desc                | cribe Your Finan                                     | cial Asset | s                             |  | '                              |   |
|                 |                          |  |            | quitable interest in any of   | the following?   |                                | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| [               | □No                      |  | -          | ır wallet, in your home, in a | safe deposit box, and on hand                                      | when you file your petition    |   |
| -               | _ 103                    |  |            |                               |  | Cash on hand                   | \$20.00   |
| [               | <i>Example</i> ☐ No      |  |            |                               | ertificates of deposit; shares in the same institution, list each. | credit unions, brokerage hous  | es, and other similar   |
|                 | -3                       |  |            |                               | Donle of Associate   |                                | <b>64 050 00</b>  |
|                 |                          |  | 17.1.      | Checking Account              | Bank of America  |                                | \$1,250.00  |
|                 |                          |  | 17 2       | Savings Account               | Bank of America  |                                | \$112.50  |

Official Form 106A/B Schedule A/B: Property page 3

Case 17-41812 Doc 1 Filed 03/20/17 Entered 03/20/17 14:45:58 Main Document Pg 13 of 37 Case number (if known) Debtor 1 Fauss, Kara Other Financial Account **Paypal** \$204.30 17.3. Other Financial Account Venmo \$41.00 17.4. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture ☐ No Yes. Give specific information about them..... Name of entity: % of ownership: **Fauss Consulting** 100.00 \$0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: IRA **Northwestern Mutual** \$54,210.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

# 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

#### 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Case 17-41812 Doc 1 Filed 03/20/17 Entered 03/20/17 14:45:58 Main Document Pg 14 of 37 Case number (if known) Debtor 1 Fauss, Kara Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: \$70,000.00 **Northwestern Mutual Jason Fauss** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Part 4. Write that number here.....

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for

37. Do you own or have any legal or equitable interest in any business-related property?

☐ No. Go to Part 6.

Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

\$125,837.80

| Debtor                         | <sup>1</sup> Fauss, Kara  | Pg 15 01 37  | Case number (if known)           |                          |
|--------------------------------|---|--|----------------------------------|--------------------------|
| 38. <b>Acc</b>                 |   | commissions you already earned   |                                  |                          |
|                                | es. Describe  |  |                                  |                          |
|                                |   | Accounts Receivables   |                                  | \$900.00                 |
| Ex.<br>■ N                     | amples: Business-rela   | shings, and supplies<br>ted computers, software, modems, printers, copiers, fax machin   | nes, rugs, telephones, desks, ch | airs, electronic devices |
| ■ N                            |   | lipment, supplies you use in business, and tools of your t   | rade                             |                          |
| 41. <b>Inv</b> e<br>■ N<br>□ Y | •   |  |                                  |                          |
| ■ N                            | -   | s or joint ventures rmation about them Name of entity:   | % of ownership:                  |                          |
| ■ No                           | ).  | lists, or other compilations  sonally identifiable information (as defined in 11 U.S.C. § 101(41A))                                    | )?                               |                          |
| ■ N                            | v business-related p  | operty you did not already list  |                                  |                          |
|                                |   | f all of your entries from Part 5, including any entries for poer here   |                                  | \$900.00                 |
| Part 6:                        |   | nd Commercial Fishing-Related Property You Own or Have an Int  | terest In.                       |                          |
|                                | you own or have any<br>No. Go to Part 7.<br>Yes. Go to line 47. | / legal or equitable interest in any farm- or commercial fisl  | hing-related property?           |                          |
| Ex.<br>■ N                     | you have other prop<br>amples: Season ticke                     | erty You Own or Have an Interest in That You Did Not List Above erty of any kind you did not already list? is, country club membership | 9                                |                          |
| ЦΥ                             | es. Give specific infor   | mation   |                                  |                          |

Official Form 106A/B Schedule A/B: Property page 6

\$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

Pg 16 of 37 Debtor 1 Case number (if known) Fauss, Kara Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$205,000.00 Part 2: Total vehicles, line 5 56. \$9,000.00 Part 3: Total personal and household items, line 15 57. \$5,850.00 58. Part 4: Total financial assets, line 36 \$125,837.80 Part 5: Total business-related property, line 45 59. \$900.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$141,587.80

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$346,587.80

\$141,587.80

Official Form 106A/B Schedule A/B: Property page 7

| mation to identify your  | case:                 |  |   |
|--------------------------|-----------------------|--|---|
| Kara Fauss               |                       |  |   |
| First Name               | Middle Name           | Last Name                                      | <del></del> )   |
|                          |                       |  |   |
| First Name               | Middle Name           | Last Name                                      |   |
| ankruptcy Court for the: | EASTERN DISTRICT O    | F MISSOURI, ST. LOUIS DIVISION                 |   |
|                          |                       |  | ☐ Check if this is an amended filing  |
|                          | Kara Fauss First Name | First Name Middle Name  First Name Middle Name | Kara Fauss First Name Middle Name Last Name  First Name Middle Name Last Name |

#### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own | Amount of the exemption you                          | u claim   | Specific laws that allow exemption |  |
|--|---|--|-----------|------------------------------------|--|
|  | Copy the value from<br>Schedule A/B     | Check only one box for each ex                       | xemption. |                                    |  |
| 1412 Heritage Valley Dr  | \$205,000.00                            | <b>-</b>   |           | 11 USC § 522(b)(3)(B)              |  |
| High Ridge MO, 63049-1166 County: St. Louis Line from Schedule A/B 1.1                 |   | ■ 100% of fair market val any applicable statutor    |           |                                    |  |
| Toyota<br>Sienna   | \$3,400.00                              | <b>■</b> \$3   | 3,000.00  | RSMo § 513.430.1(5)                |  |
| 2009<br>145000<br>Line from <i>Schedule A/B</i> : 3.2                                  |   | ☐ 100% of fair market val any applicable statutor    | ′ '       |                                    |  |
| Misc. household goods Line from Schedule A/B. 6.1                                      | \$2,500.00                              | <b>=</b> \$2   | 2,500.00  | RSMo § 513.430.1(1)                |  |
| Line Holli Schedule A/L. G.1   |   | ☐ 100% of fair market val any applicable statutor    | ′ '       |                                    |  |
| Misc. household electronics Line from Schedule A/B. 7.1                                | \$500.00                                | <b>.</b>   | \$500.00  | RSMo § 513.430.1(1)                |  |
| Ellie Holli Galladale 772. FT  |   | ☐ 100% of fair market val<br>any applicable statutor |           |                                    |  |
| Misc. Jewelry Line from Schedule A/B: 12.1   | \$2,500.00                              | <b>■</b> \$1   | 1,500.00  | RSMo § 513.430.1(2)                |  |
| Elle Horli Goriodale 77D. 12.1   |   | ☐ 100% of fair market val any applicable statutor    |           |                                    |  |

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|    | Brief description of the property and line on Schedule A/B that lists this property                      | Current value of the Amount of the exemption you claim portion you own |     |   | Specific laws that allow exemption |  |  |  |  |
|----|--|--|-----|---|------------------------------------|--|--|--|--|
|    |  | Copy the value from<br>Schedule A/B                                    | Che | eck only one box for each exemption.                            |                                    |  |  |  |  |
|    | Misc. Jewelry Line from Schedule A/B: 12.1   | \$2,500.00   |     | \$500.00  | RSMo § 513.430.1(2)                |  |  |  |  |
|    | Line Holli ediledale 702. 1211   |  |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
|    | Bank of America Line from Schedule A/B 17.1  | \$1,250.00   |     | \$600.00  | RSMo § 513.430.1(3)                |  |  |  |  |
|    | Elle Holl Galledale A/D 17.1   |  |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
|    | Northwestern Mutual Line from Schedule A/B 21.1  | \$54,210.00  |     |   | RSMo § 513.430.1(10)(f)            |  |  |  |  |
|    | Line from Schedule A/B. 21.1   |  |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
|    | Northwestern Mutual Line from Schedule A/B 31.1  | \$70,000.00  |     | \$70,000.00   | RSMo § 513.430.1(8)                |  |  |  |  |
|    | Elic Holli Galledale A/D G1.1  |  |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3                     |  |     | on or after the date of adjustment.)                            |                                    |  |  |  |  |
|    | ■ No   |  |     |   |                                    |  |  |  |  |
|    | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? |  |     |   |                                    |  |  |  |  |

Yes

| Debtor 1    Kara Fauss  | 0030 17 41012 00                                | Po 10 of 27  | 3/20/11 14.43.0         | - Wall Doca        | mone          |
|---|---|--|-------------------------|--------------------|---------------|
| Debtor 2   Googae 5, Irigal   First Name  | Fill in this information to identify you        | r case: Pg 19 0137   |                         |                    |               |
| Debtor 2   Secure 1, Hung   Trex Norme  | Debtor 1 Kara Fauss                             |  |                         |                    |               |
| Check if this is an amended filing  |   | Middle Name Last Name                                      |                         |                    |               |
| United States Bankruptcy Court for the:  Case number  Case number  Case number  Case number  Case number  Case number  Chack if this is an amended filing  12/15  Bas complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is two work.  1. Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Part Fil in all of the information below.  Part Fil in all of the information below    |   | Middle Nome Leat Nome                                      |                         |                    |               |
| Case number (# Moown)    Check if this is an amended filing   |   |  |                         |                    |               |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more paper inneeded, copy the Additional Page, fill too, number the extrete, and attach it to this form. On the top of any additional pages, write your name and case number (innovan).  1. to any creditors have claims secured by your property?  1. No. Check this box and submit this form to the court with your other schedules. You have nothing dise to report on this form.  1. Lo any creditors have claims secured by your property?  1. No any creditors have claims secured by your property?  1. No any creditors have claims secured to have a continue to the count with your other schedules. You have nothing dise to report on this form.  1. Lo any creditors have claims as cured to have a continue to the count with your other schedules. You have nothing dise to report on this form.  2. Liki at secured claims. If a conditor has more have none centre has a practical red, like the other creditors in Part 2. As amount of claim prove than one reduction has part has a condition has more has none centre has a practical radium, list the order creditors in Part 2. As amount of claim pone than one centre has a practical radium, list the order creditors in Part 2. As a dept. A secured that supports this claims in high part of the claim secured that supports this claim creditor should be continued to the claim secured that supports this claim claims of the district of the dist    | United States Bankruptcy Court for the:         | EASTERN DISTRICT OF MISSOURI, ST. LC                       | DUIS DIVISION           |                    |               |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more paper inneeded, copy the Additional Page, fill too, number the extrete, and attach it to this form. On the top of any additional pages, write your name and case number (innovan).  1. to any creditors have claims secured by your property?  1. No. Check this box and submit this form to the court with your other schedules. You have nothing dise to report on this form.  1. Lo any creditors have claims secured by your property?  1. No any creditors have claims secured by your property?  1. No any creditors have claims secured to have a continue to the count with your other schedules. You have nothing dise to report on this form.  1. Lo any creditors have claims as cured to have a continue to the count with your other schedules. You have nothing dise to report on this form.  2. Liki at secured claims. If a conditor has more have none centre has a practical red, like the other creditors in Part 2. As amount of claim prove than one reduction has part has a condition has more has none centre has a practical radium, list the order creditors in Part 2. As amount of claim pone than one centre has a practical radium, list the order creditors in Part 2. As a dept. A secured that supports this claims in high part of the claim secured that supports this claim creditor should be continued to the claim secured that supports this claim claims of the district of the dist    | Case number                                     |  |                         |                    |               |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15 Be as complete and accurate as possible. If two married people are filing together, both ane equally responsible for supplying correct information. If more space is medically the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (introve).    Yes, Fill in all of the information below.   |   |  |                         | ☐ Check            | if this is an |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space in needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (introver).  In on any creditors have claims secured by your property?  In No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  If yes, Fill in all of the information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill    |   |  |                         | ameno              | led filing    |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space in needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (introver).  In on any creditors have claims secured by your property?  In No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  If yes, Fill in all of the information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill in All of the Information below.  In Yes, Fill    | Official Form 106D                              |  |                         |                    |               |
| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is from the top of any additional pages, write your name and case number (is known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.   |   | W// II OI I O  |                         |                    |               |
| needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (incomy).  1. Do any redditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   No. Check this more than one secured claim, list the creditor separately for each claim: I find the information below.   No. Check this more than one secured claim, list the creditor separately for each claim:   Santan   | Schedule D: Creditors                           | Who Have Claims Secured                                    | by Propert              | У                  | 12/15         |
| No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    No. Check this factor check and the information below.    No. Check this factor check and the information below.    No. Check and the information below.   No. Check and the information below.   No. Check and the information below.   No. Check and the information below.   No. Check and the information below.   No. Check and the information below.   No. Check and the information below.   No. Check and the information below.   No. Check and the information below.   No. Check a       |   |  |                         |                    |               |
| Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If a creditor has a particular claim, list the creditor is name.  2. List all secured claims. If a creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.  2.1 Chase Home Finance  2.2 Creditor's Name  3415 Vision Drive Columbus, OH 43219-6009  Number, Silveut, City, State & Zip Cose  Who owes the debt? Check one.  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  Date debt was incurred 10/2008  2.2 Santander Consumer USA  Creditor's Name  2.3 If the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As a file date you file, the claim is: Check all that poply.  As of the date you file, the claim is: Check all that poply.  As a file date you file, the claim is: Check all that poply.  As a file date you file (the claim is: Check all that poply.  As a file date you file (the claim is: Check all that poply.  An a greement you made (such as mortgage or secured car loan)  Debtor 1 and     | 1. Do any creditors have claims secured by      | your property?   |                         |                    |               |
| Column A   Column B   Column C   Column A   Column B   Column C   Column B       | $\square$ No. Check this box and submit th      | is form to the court with your other schedules. You        | have nothing else to re | port on this form. |               |
| Column A   Column B   Column C   Column A   Column B   Column C   Column B       | Yes. Fill in all of the information b           | elow.  |                         |                    |               |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the orderior's name with a spossible, list the claims in a phabetect order according to the recetifor's name.  2.1 Chase Home Finance  Creditors Name    1412 Heritage Valley Dr, High Ridge, MO 53049-1166   Residence As of the date you file, MO 53049-1166   Residence As of the date you file, MO 53049-1166   Residence As of the date you file, the claim is: Check all that apply.    Debtor 1 only  |   |  |                         |                    |               |
| for each claim. If more than one creditor has a particular claim, list the other creditor's in Pari 2. As mount of claim by not deduct the value of collateral. \$407,208.00 \$2.10   |   | more than one secured claim, list the creditor senarately  | Column A                | Column B           | Column C      |
| 2.1   Chase Home Finance   Describe the property that secures the claim: \$407,208.00   \$410,000.00   \$0.00   | for each claim. If more than one creditor has   | a particular claim, list the other creditors in Part 2. As |                         |                    |               |
| Creditor's Name   Creditor's Name   Satisfies   Sati      | much as possible, list the claims in alphabetic | cal order according to the creditor 's name.               |                         |                    | •             |
| Satta   Statutory lien   Check all that apply.   Right   Statutory lien   Check all that apply.   Right   Statutory lien   Check all that apply.   Residence   Statutory lien   Check all that apply.   Statutory lien   Statutory lien   Check all that apply.   Statutory lien   Statutory lien   Statutory lien   Statutory lien   Check all that apply.   Statutory lien   Check all that apply.   Statutory lien   Statutory lien   Check all that apply.   Statutory lien   Statutory li      | 2.1 Chase Home Finance                          | Describe the property that secures the claim:              |                         |                    | \$0.00        |
| Residence   As of the date you file, the claim is: Check all that apply.   Contingent   Uniquidated   Disputed  | Creditor's Name                                 |  |                         |                    |               |
| As of the date you file, the claim is: Check all that apply.    As of the date you file, the claim is: Check all that apply.  |   | 9 '  |                         |                    |               |
| Columbus, OH 43219-6009  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred  Date debt was incurred 10/2008  Last 4 digits of account number  Describe the property that secures the claim:  PO Box 961245 Fort Worth, TX 76161-0244 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as task lien, mechanic's lien) Debtor 1 only Olettor 2 only Debtor 1 only Olettor 2 only Olettor 2 only Olettor 3 only Debtor 1 only Olettor 3 only Debtor 3 only Olettor 4 only Debtor 4 only Olettor 4 only Olettor 5 only Debtor 5 only Olettor 5 only Debtor 6 only Olettor 8 only Olettor 9    |   |  |                         |                    |               |
| Number, Street, City, State & Zip Code   Disputed   Disputed  |   | apply.   |                         |                    |               |
| Who owes the debt? Check one.  Disputed Nature of lien. Check all that apply.  Debtor 1 only Debtor 2 only An agreement you made (such as mortgage or secured car (ann) Statutory lien (such as tax lien, mechanic's lien) Uddgment lien from a lawsuit Check if this claim relates to a community debt  Date debt was incurred 10/2008  Last 4 digits of account number 2440  Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  PO Box 961245 Fort Worth, TX 76161-0244 Number, Street, City, State & Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 |   | _  |                         |                    |               |
| Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Statutory lien (such as mortgage or secured car loan) Date debt was incurred 10/2008  Last 4 digits of account number 2440  2.2 Santander Consumer USA Creditor's Name PO Box 961245 Fort Worth, TX 76161-0244 Number, Street, City, State & Zip Code Nature of lien. Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another car loan) Statutory lien (such as tax lien, mechanic's lien) Statutory lien (such as mortgage or secured car loan) Statutory lien (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Statutory lien (such as mortgage or secured car loan)                    | Number, Street, City, State & Zip Code          | <u> </u>   |                         |                    |               |
| Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244 Number, Street, City, State & Zip Code  Who owes the debt'? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 and Debtor 3 and another Debtor 1 and Debtor 3 and Debtor 3 only Debtor 1 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 and Debtor 3 only Debtor 4 only Debtor 1 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 are 2 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor     | Who owes the debt? Check one.                   | ·  |                         |                    |               |
| Debtor 2 only   | _   |  | ured                    |                    |               |
| At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred 10/2008  Last 4 digits of account number 2440  2.2 Santander Consumer USA Creditor's Name PO Box 961245 Fort Worth, TX 76161-0244 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Check if this claim rel    |   | , ,  | uicu                    |                    |               |
| Check if this claim relates to a community debt  Date debt was incurred 10/2008  Last 4 digits of account number 2440  2.2 Santander Consumer USA  Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 anly At least one of the debtors and another Check if this claim relates to a community debt  Check if this claim relates to a community debt  Check if this claim relates to a community debt  Contingent Indicated     | ☐ Debtor 1 and Debtor 2 only                    |  |                         |                    |               |
| Date debt was incurred 10/2008 Last 4 digits of account number 2440  2.2 Santander Consumer USA  Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt  Check if this claim relates to a community debt  | At least one of the debtors and another         |  |                         |                    |               |
| Date debt was incurred 10/2008  Last 4 digits of account number 2440  2.2 Santander Consumer USA  Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Last 4 digits of account number 2440  Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  \$2,721.08  |   | Other (including a right to offset)                        |                         |                    |               |
| 2.2 Santander Consumer USA  Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  | community debt                                  |  |                         |                    |               |
| Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  \$2,721.08  \$2,721.08  \$5,600.00 \$2,721.08   | Date debt was incurred 10/2008                  | Last 4 digits of account number 2440                       |                         |                    |               |
| Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Describe the property that secures the claim: \$8,321.08 \$5,600.00 \$2,721.08  \$2,721.08  \$2,721.08  \$5,600.00 \$2,721.08   |   |  |                         |                    |               |
| Creditor's Name  PO Box 961245 Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Describe the property that sectries the claim:  ### 45,521:00      | Santander Consumer                              |  | <b>#0.004.00</b>        | <b>#5 000 00</b>   | A0 704 00     |
| PO Box 961245 Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  | USA   |  | \$8,321.08              | \$5,600.00         | \$2,721.08    |
| Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)  | Creditor's Name                                 | 2012 Hyundai Santa Fe                                      |                         |                    |               |
| Fort Worth, TX 76161-0244  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)  | PO Box 961245                                   |  |                         |                    |               |
| Total form   To       |   |  |                         |                    |               |
| Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)   |   |  |                         |                    |               |
| Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  □ Check if this claim relates to a   | Number, Street, City, State & Zip Code          | ☐ Unliquidated   |                         |                    |               |
| □ Debtor 1 only □ An agreement you made (such as mortgage or secured car loan) □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Check if this claim relates to a community debt □ Other (including a right to offset) □ Other (including a right to offset)   |   | •  |                         |                    |               |
| □ Debtor 2 only car loan)  □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien)  □ At least one of the debtors and another □ Judgment lien from a lawsuit  □ Check if this claim relates to a community debt  □ Other (including a right to offset)  | _   |  |                         |                    |               |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset)  | _   | , ,  | ured                    |                    |               |
| ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt ☐ Other (including a right to offset)   |   | <u> </u>   |                         |                    |               |
| Check if this claim relates to a community debt  Other (including a right to offset)  |   |  |                         |                    |               |
| community debt  | _   | <u> </u>   |                         |                    |               |
| Date debt was incurred 4/2013 Last 4 digits of account number 6285  |   | Strot (morading a right to onset)                          |                         |                    |               |
|   | Date debt was incurred 4/2013                   | Last 4 digits of account number 6295                       |                         |                    |               |

Official Form 106D

| Debtor 1 Kara Fauss   | Case number (f know)   |   |                              |          |
|---|--|---|------------------------------|----------|
| First Name Middle   | Name Last Name   |   |                              |          |
| 2.3 Wells Fargo Dealer<br>Services  | Describe the property that secures the claim:  | \$4,869.00  | \$6,800.00                   | \$0.00   |
| Creditor's Name   | 2009 Toyota Sienna   |   |                              |          |
| P.O. Box 168048 Irving, TX 75016-8048  Number, Street, City, State & Zip Code                             | As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  |   |                              |          |
| rames, enest, eny, etais a Especial   | ☐ Disputed   |   |                              |          |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.  |   |                              |          |
| ☐ Debtor 1 only ☐ Debtor 2 only   | An agreement you made (such as mortgage or<br>car loan)  | secured   |                              |          |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)   | )   |                              |          |
| At least one of the debtors and another   | ☐ Judgment lien from a lawsuit   |   |                              |          |
| ☐ Check if this claim relates to a community debt   | Other (including a right to offset)  |   |                              |          |
| Date debt was incurred 1/2012   | Last 4 digits of account number  | 94  |                              |          |
|   |  |   |                              |          |
| Add the dollar value of your entries in Co  | olumn A on this page. Write that number here:  | \$420,398.08  | 7                            |          |
| If this is the last page of your form, add t Write that number here:                                      | he dollar value totals from all pages.   | \$420,398.08  | ]                            |          |
| Part 2: List Others to Be Notified for  | or a Debt That You Already Listed  |   |                              |          |
| trying to collect from you for a debt you   | be notified about your bankruptcy for a debt that y<br>owe to someone else, list the creditor in Part 1, an<br>at you listed in Part 1, list the additional creditors h<br>his page. | d then list the collection agenc                                | y here. Similarly, if you ha | ive more |
| Name, Number, Street, City, State & South And Associates 13160 Foster St Ste 100 Overland Park, KS 66213- | Lasi   | which line in Part 1 did you enter t 4 digits of account number |                              |          |

| Ouse  | 17 41012 DOC  | 1 11100 00/20/1  |  | .0/17 14.45.50  | Widin Do   | Curricit   |
|---|---|--|--|---|--|--|
| Fill in this inforr   | nation to identify your c   | ase:   | Pg 21 of 37  |   |  |  |
| Debtor 1  | Kara Fauss  |  |  |   |  |  |
|   | First Name  | Middle Name  | Last Name  |   |  |  |
| Debtor 2<br>(Spouse if, filing)                               | First Name  | Middle Name  | Last Name  |   |  |  |
| United States Ba  | nkruptcy Court for the:   | EASTERN DISTRICT (   | OF MISSOURI, ST. LOUIS   | DIVISION  |  |  |
| Case number _ (if known)                                      |   |  |  |   | _  | eck if this is an<br>ended filing  |
|   | /F: Creditors W   |  | ured Claims  | for craditors with NONI   | PPIOPITY claims  | 12/15  |
| any executory cont<br>Schedule G: Execu<br>D: Creditors Who F | tracts or unexpired leases to<br>story Contracts and Unexpi<br>Have Claims Secured by Pro<br>age to this page. If you hav | that could result in a claim<br>red Leases (Official Form 1<br>operty. If more space is ne | Also list executory contra<br>106G). Do not include any c<br>eded, copy the Part you ned<br>in a Part, do not file that Pa | cts on Schedule A/B: P<br>reditors with partially so<br>ed, fill it out, number the | roperty (Official I<br>ecured claims that<br>e entries in the bo | Form 106A/B) and on<br>at are listed in Schedule<br>oxes on the left. Attach |
| Part 1: List A  | II of Your PRIORITY Uns   | secured Claims   |  |   |  |  |
| 1. Do any credite   | ors have priority unsecured   | l claims against you?  |  |   |  |  |
| ☐ No. Go to F   | Part 2.   |  |  |   |  |  |
| Yes.  |   |  |  |   |  |  |
| identify what ty<br>possible, list th                         | pe of claim it is. If a claim has   | s both priority and nonpriority<br>r according to the creditor 's                          | one priority unsecured claim,<br>y amounts, list that claim here<br>name. If you have more than<br>rs in Part 3.           | and show both priority a  | nd nonpriority amo   | ounts. As much as  |
|   | ation of each type of claim, se   |  |  |   |  |  |
| (, 5, 5, 7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,            | ,,,   |  | ,  | Total claim   | Priority amount  | Nonpriority amount   |
|   | I Revenue Service   | Last 4 digits o  | of account number  | unknown   | \$0  | .00 \$0.00   |
| Priority Cr   | reditor's Name  | When was the   | debt incurred?   |   |  |  |
|   | elphia, PA 19101-7340   | 6  |  |   | -  |  |
|   | Street City State Zlp Code  | As of the date   | you file, the claim is: Chec   | k all that apply  |  |  |
| _   | d the debt? Check one.  | ☐ Contingent   |  |   |  |  |
| Debtor 1 o  | ·   | ☐ Unliquidate  | d  |   |  |  |
| Debtor 2 o  | ·   | ☐ Disputed   |  |   |  |  |
| Debtor 1  | and Debtor 2 only   | Type of PRIOR  | RITY unsecured claim:  |   |  |  |
| At least or   | ■ At least one of the debtors and another □ Domestic support obligations  |  |  |   |  |  |
| ☐ Check if  | this claim is for a commun  | ity debt Taxes and   | certain other debts you owe t  | he government   |  |  |
| Is the claim  | subject to offset?  | ☐ Claims for o   | death or personal injury while   | you were intoxicated  |  |  |
| ■ No  |   | ☐ Other. Spec  | cify   |   |  |  |
| ☐ Yes   |   |  |  | ·   |  |  |

Pg 22 of 37 Case number (f know) Debtor 1 Fauss, Kara Missouri Department Of Revenue 2.2 Last 4 digits of account number \$0.00 unknown \$0.00 Priority Creditor's Name When was the debt incurred? 2016 P.O. Box 475 Bankruptcy Unit Jefferson City, MO 65101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: At least one of the debtors and another ☐ Domestic support obligations Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  $\square$  No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part Total claim 4.1 Chase Bank USA Last 4 digits of account number 6144 \$8,000.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

> $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Revolving Credit

■ No

☐ Yes

Debtor 1 Fauss, Kara

Pg 23 of 37 Case number (f know)

| Dell Financial Services                  | Last 4 digits of account number 1299  | \$1,200.0 |
|--|---|-----------|
| Nonpriority Creditor's Name              | <del></del>   | •         |
|  | When was the debt incurred?   |           |
| P.O. Box 81577                           |   |           |
| Austin, TX 59446                         | _   |           |
| Number Street City State Zlp Code        | As of the date you file, the claim is: Check all that apply                     |           |
| Who incurred the debt? Check one.        |   |           |
| Debtor 1 only                            | ☐ Contingent  |           |
| Debtor 2 only                            | ☐ Unliquidated  |           |
| Debtor 1 and Debtor 2 only               | ☐ Disputed  |           |
| At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |           |
| ☐ Check if this claim is for a community | ☐ Student loans   |           |
| debt                                     | ☐ Obligations arising out of a separation agreement or divorce that you did not |           |
| Is the claim subject to offset?          | report as priority claims   |           |
| ■ No                                     | ☐ Debts to pension or profit-sharing plans, and other similar debts             |           |
| ☐ Yes                                    | Other. Specify Revolving Credit   |           |

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                          |     |   |     | Total Claim    |
|--------------------------|-----|---|-----|----------------|
|                          | 6a. | Domestic support obligations  | 6a. | \$<br>0.00     |
| Total claims             |     |   |     |                |
| from Part 1              | 6b. | Taxes and certain other debts you owe the government                              | 6b. | \$<br>0.00     |
|                          | 6c. | Claims for death or personal injury while you were intoxicated                    | 6c. | \$<br>0.00     |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.           | 6d. | \$<br>0.00     |
|                          | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00     |
|                          |     |   |     | Total Claim    |
|                          | 6f. | Student loans   | 6f. | \$<br>0.00     |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that                 |     |                |
| Hom Fait 2               | og. | you did not report as priority claims   | 6g. | \$<br>0.00     |
|                          | 6h. | Debts to pension or profit-sharing plans, and other similar debts                 | 6h. | \$<br>0.00     |
|                          | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$<br>9,200.00 |
|                          | 6j. | Total Nonpriority. Add lines 6f through 6i.                                       | 6j. | \$<br>9,200.00 |

| Fill in this inform             | ation to identify your | case:              | Pg 24 of 37               |        |   |                                    |
|---------------------------------|------------------------|--------------------|---------------------------|--------|---|------------------------------------|
| Debtor 1                        | Kara Fauss First Name  | Middle Name        | Last Name                 |        | 1 |                                    |
| Debtor 2<br>(Spouse if, filing) | First Name             | Middle Name        | Last Name                 |        |   |                                    |
| United States Ban               | kruptcy Court for the: | EASTERN DISTRICT O | F MISSOURI, ST. LOUIS DIV | /ISION |   |                                    |
| Case number                     |                        |                    |                           |        |   | Check if this is an amended filing |

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code  State what the contract or lease is for |  |
|--|--|
| 2.1  |  |
| Name   |  |
|  |  |
| Number Street  |  |
|  |  |
| City State ZIP Code  |  |
| 2.2  |  |
| Name   |  |
|  |  |
| Number Street  |  |
|  |  |
| City State ZIP Code  |  |
| 2.3  |  |
| Name   |  |
|  |  |
| Number Street  |  |
|  |  |
| City State ZIP Code  |  |
| 2.4  |  |
| Name   |  |
|  |  |
| Number Street  |  |
|  |  |
| City State ZIP Code  |  |
| 2.5  |  |
| Name   |  |
|  |  |
| Number Street  |  |
|  |  |
| City State ZIP Code  |  |

| Fill in th   | nis information to identify your   | case:   | Pg 25 of 37  |  |
|--|--|---|--|--|
| Debtor 1   |  |   |  |  |
|  | First Name   | Middle Name   | Last Name  | <del></del> }  |
| Debtor 2<br>(Spouse if,  |  | Middle Name   | Last Name  |  |
| United S   | States Bankruptcy Court for the:   | EASTERN DISTRICT O  | F MISSOURI, ST. LOUIS DIVISION   |  |
| Case nu  | ımher  |   |  |  |
| (if known)   |  |   |  | ☐ Check if this is an amended filing   |
| ∩ffi⊲i   | al Form 106H   |   |  |  |
|  | edule H: Your Cod  | obtors  |  | 40/45  |
| Sche   | edule n. Your Cod  | eptors  |  | 12/15  |
| are filing and numcase nur  1. D  1. D  N  2. W Cali  N  Y  3. In C line 106 | g together, both are equally responder the entries in the boxes on mber (if known). Answer every comber (if known). Answer every combet (if known). Answer eve | consible for supplying continuous the left. Attach the Additional question.  You are filing a joint case, do lived in a community property, New Mexico, Puerto Rico, se, or legal equivalent live wors. Do not include your shat person is a guarantor of the left. | rrect information. If more space is onal Page to this page. On the top on not list either spouse as a codebtor.  Operty state or territory? (Commun Texas, Washington, and Wisconsin ith you at the time?  Spouse as a codebtor if your spousor cosigner. Make sure you have I | nd accurate as possible. If two married people needed, copy the Additional Page, fill it out, of any Additional Pages, write your name and ity property states and territories include Arizona,.)  se is filing with you. List the person shown in sted the creditor on Schedule D (Official Form D, Schedule E/F, or Schedule G to fill out |
| Col  | umn 2.   |   | 0.4  |  |
|  | Column 1: Your codebtor Name, Number, Street, City, State and Z  | IP Code   |  | all schedules that apply:  |
|  |  |   |  |  |
| 3.1  | Jason Fauss  |   | ■ Sch  | edule D, line <b>2.1</b>   |
|  | 1412 Heritage Valley Dr<br>High Ridge, MO 63049-11   | 66  |  | edule E/F, line  |
|  | riigii itiage, iiio 00043 Ti   | 00  |  | edule G<br>Home Finance  |
|  |  |   | Chase  | Home Finance   |
|  |  |   |  |  |
| 3.2  | Jason Fauss  |   | ☐ Sch  | edule D, line  |
|  | 1412 Heritage Valley Dr<br>High Ridge, MO 63049-11   | 66  |  | edule E/F, line <b>2.1</b>   |
|  | nigh Kluge, WO 03049-11  | 00  |  | edule G  |
|  |  |   | Intern   | al Revenue Service   |
|  |  |   |  |  |
| 3.3  | Jason Fauss  |   | ☐ Sch  | edule D, line  |
|  | 1412 Heritage Valley Dr<br>High Ridge, MO 63049-11   | 66  |  | edule E/F, line <b>2.2</b>   |
|  | riigii Kiuge, WO 63049-11  | UU  |  | edule G  |
|  |  |   | Misso  | uri Department Of Revenue  |

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Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt Check all schedules that apply:

3.4 Jason Fauss
1412 Heritage Valley Dr
High Ridge, MO 63049-1166

Case number (if known)

Column 2: The creditor to whom you owe the debt Check all schedules that apply:

Schedule D, line 2.3

Schedule E/F, line Schedule G

**Wells Fargo Dealer Services** 

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| ebtor 1  | Kara Fauss  |   |  |  |   |
|--|---|---|--|--|---|
|  | First Name  | Middle Name   | Last Name  |  |   |
| ebtor 2<br>pouse if, filing)                                       | First Name  | Middle Name   | Last Name  |  |   |
| nited States Ba  | ankruptcy Court for the:  | EASTERN DISTRICT  | OF MISSOURI, ST. LOUIS DIVISIO   | DN   |   |
| ase number   |   |   |  |  |   |
| known)   |   |   |  |  | ☐ Check if this is an amended filing  |
| fficial Forr   | m 106Dec  |   |  |  |   |
|  |   | an Individua  | l Debtor's Sched   | lules  | 12/1  |
|  |   |   |  |  |   |
| aining money   | or property by fraud ir   | le bankruptcy schedule<br>n connection with a ban                   | ensible for supplying correct inform<br>s or amended schedules. Making<br>kruptcy case can result in fines up  | a false statement  |   |
| taining money<br>ars, or both. 1                                   |   | le bankruptcy schedule<br>n connection with a ban                   | s or amended schedules. Making a   | a false statement  |   |
| taining money<br>ars, or both. 1<br>Sig                            | or property by fraud in 8 U.S.C. §§ 152, 1341, 19   | le bankruptcy schedule<br>n connection with a ban<br>519, and 3571. | s or amended schedules. Making a   | a false statement<br>o to \$250,000, or  |   |
| taining money<br>ars, or both. 1<br>Sig                            | or property by fraud in 8 U.S.C. §§ 152, 1341, 19   | le bankruptcy schedule<br>n connection with a ban<br>519, and 3571. | s or amended schedules. Making a<br>kruptcy case can result in fines up  | a false statement<br>o to \$250,000, or  |   |
| sigling woney  Sigling bid you pa                                  | or property by fraud in 8 U.S.C. §§ 152, 1341, 19   | le bankruptcy schedule<br>n connection with a ban<br>519, and 3571. | s or amended schedules. Making a<br>kruptcy case can result in fines up  | a false statement to to \$250,000, or ey forms?  Attach Bankrup                    | imprisonment for up to 20   |
| Did you pa   | or property by fraud in 8 U.S.C. §§ 152, 1341, 19  n Below  y or agree to pay some  | le bankruptcy schedulen connection with a ban<br>519, and 3571.     | s or amended schedules. Making a<br>kruptcy case can result in fines up<br>rney to help you fill out bankruptc   | a false statement o to \$250,000, or ey forms?  Attach Bankrup Declaration, and    | imprisonment for up to 20  otcy Petition Preparer's Notice, d Signature (Official Form 119) |
| Did you pa   | or property by fraud in 8 U.S.C. §§ 152, 1341, 19  n Below  y or agree to pay some  | le bankruptcy schedulen connection with a ban<br>519, and 3571.     | s or amended schedules. Making a<br>kruptcy case can result in fines up  | a false statement o to \$250,000, or ey forms?  Attach Bankrup Declaration, and    | imprisonment for up to 20  otcy Petition Preparer's Notice, d Signature (Official Form 119) |
| Did you pa   | or property by fraud in 8 U.S.C. §§ 152, 1341, 19 n Below  by or agree to pay some Name of person  lity of perjury, I declare e true and correct. | le bankruptcy schedulen connection with a ban<br>519, and 3571.     | s or amended schedules. Making a<br>kruptcy case can result in fines up<br>rney to help you fill out bankruptc   | a false statement o to \$250,000, or ey forms?  Attach Bankrup Declaration, and    | imprisonment for up to 20  otcy Petition Preparer's Notice, d Signature (Official Form 119) |
| Did you pa  No Yes. N  Under pena that they are  X /s/ Kar  Kara F | or property by fraud in 8 U.S.C. §§ 152, 1341, 19 n Below  by or agree to pay some Name of person  lity of perjury, I declare e true and correct. | le bankruptcy schedulen connection with a ban<br>519, and 3571.     | s or amended schedules. Making a kruptcy case can result in fines up the result in fines up | a false statement to to \$250,000, or  cy forms?  Attach Bankrup  Declaration, and | imprisonment for up to 20  otcy Petition Preparer's Notice, d Signature (Official Form 119) |

| Em to date                   | to farmer than to be bounded as a second                 |  |   |  |   |
|------------------------------|--|--|---|--|---|
|                              | information to identify your                             | case:  |   |  |   |
| Debtor 1                     | Kara Fauss First Name                                    | Middle Name  | Last Name   |  |   |
| Debtor 2                     |  |  |   |  |   |
| (Spouse if, filing           | ng) First Name   | Middle Name  | Last Name   |  |   |
| United Sta                   | tes Bankruptcy Court for the:                            | EASTERN DISTRICT OF  | MISSOURI, ST. LOUIS DIVI                              | SION                                       |   |
| Case numl                    | ber  |  |   | -  | Check if this is an amended filing                    |
| Statem Be as compinformation | plete and accurate as possil                             | Affairs for Indivicular line of the Affairs for Individual line of the Affairs for Ind | e filing together, both are ed                        | ually responsible for supply               |   |
|                              | Give Details About Your Ma                               | rital Status and Where You   | Lived Before  |  |   |
| ☐ N<br>2. During             | lo   | <b>lived anywhere other than w</b><br>yed in the last 3 years. Do not i  | ·   |  |   |
| Debte                        | or 1 Prior Address:                                      | Dates Debtor 1 I   | ived Debtor 2 Prior Ad                                | dress:                                     | Dates Debtor 2<br>lived there                         |
| states and t                 | <i>territori</i> es include Arizona, Cal<br>lo           | rer live with a spouse or legatifornia, Idaho, Louisiana, Never  | ada, New Mexico, Puerto Ric                           |  |   |
| Part 2                       | Explain the Sources of You                               | r Income   |   |  |   |
| Fill in t                    | the total amount of income yo                            | nployment or from operating<br>u received from all jobs and a<br>nave income that you receive to   | Il businesses, including part-t                       | ime activities.                            | dar years?  |
|                              |  | Debtor 1   |   | Debtor 2                                   |   |
|                              |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |
|                              | uary 1 of current year until<br>ou filed for bankruptcy: | ☐ Wages, commissions, bonuses, tips  | \$2,884.00  | ☐ Wages, commissions, bonuses, tips        |   |
|                              |  | Operating a business   |   | ☐ Operating a business                     |   |

| Debtor 1 F                    | auss, Kara                         |                                 |   | Pg 29 of 37  | Case         | e number (if known)                     |                              |   |
|-------------------------------|------------------------------------|---------------------------------|---|--|--------------|---|------------------------------|---|
|                               |                                    |                                 |   | _  |              |   |                              |   |
|                               |                                    |                                 | Debtor 1  |  |              | Debtor 2                                |                              |   |
|                               |                                    |                                 | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions<br>exclusions)                    | and          | Sources of ince<br>Check all that a     |                              | Gross income<br>(before deductions<br>and exclusions) |
| For last cale<br>(January 1 t | endar year:<br>o December :        | 31, 2016 )                      | ☐ Wages, commissions, bonuses, tips   | \$24,45  | 52.00        | ☐ Wages, com bonuses, tips              | missions,                    |   |
|                               |                                    |                                 | Operating a business  |  |              | Operating a                             | business                     |   |
|                               | ndar year bef<br>o December 3      |                                 | ☐ Wages, commissions, bonuses, tips   | \$28,90  | 2.00         | ☐ Wages, com bonuses, tips              | missions,                    |   |
|                               |                                    |                                 | Operating a business  |  |              | ☐ Operating a                           | business                     |   |
| List each                     | 0 ,                                | ne gross inco                   | ave income that you received to   |  |              |   |                              |   |
|                               |                                    |                                 | Debtor 1  |  |              | Debtor 2                                |                              |   |
|                               |                                    |                                 | Sources of income<br>Describe below.  | Gross income fro<br>each source<br>(before deductions<br>exclusions) |              | Sources of inco<br>Describe below.      |                              | Gross income<br>(before deductions<br>and exclusions) |
| Part 3: Li                    | st Certain Pa                      | yments You                      | Made Before You Filed for   | Bankruptcy   |              |   |                              |   |
| 6. Are eith<br>□ No.          | <b>Neither De</b> individual p     | ebtor 1 nor E<br>rimarily for a | 's debts primarily consumer<br>Debtor 2 has primarily consu-<br>personal, family, or household<br>ore you filed for bankruptcy, did       | umer debts. Consume<br>I purpose."                                   |              |   | .S.C. § 101(8                | 3) as "incurred by an                                 |
|                               | □ No.                              | Go to line                      |   | i you pay any oreanor a  | total of     | φο, 420 οι ποιο:                        |                              |   |
|                               | Yes                                | creditor. Depayments to         | each creditor to whom you paid<br>o not include payments for do<br>to an attorney for this bankrupto<br>t on 4/01/19 and every 3 years    | mestic support obligati<br>cy case.                                  | ons, su      | ch as child suppor                      | t and alimon                 | otal amount you paid that<br>y. Also, do not include  |
| ■ Yes                         | Debtor 1 c                         | r Debtor 2 c                    | or both have primarily consure you filed for bankruptcy, did  | ımer debts.  |              | •                                       |                              |   |
|                               | ■ No.                              | Go to line                      | 7.  |  |              |   |                              |   |
|                               | □ <sub>Yes</sub>                   |                                 | each creditor to whom you paid<br>for domestic support obligation<br>aptcy case.  |  |              |   |                              |   |
| Credito                       | r's Name and                       | l Address                       | Dates of payme  |  | ount<br>paid | Amount you still owe                    | Was this p                   | payment for   |
| 7 \4/!4!-!                    | waar baf                           | van fila i f                    | hankernter did  |  |              |   |                              | ~~2   |
| <i>Insiders</i> which yo      | include your re<br>u are an office | elatives; any o                 | r bankruptcy, did you make a<br>general partners; relatives of ar<br>erson in control, or owner of 20<br>prietor. 11 U.S.C. § 101. Includ | ny general partners; par<br>1% or more of their votir                | tnership     | os of which you are ities; and any mana | a general pa<br>aging agent, | artner; corporations of including one for a           |

**Total amount** 

paid

Amount you

still owe

Dates of payment

Reason for this payment

☐ Yes. List all payments to an insider.

Insider's Name and Address

Case 17-41812 Doc 1 Filed 03/20/17 Entered 03/20/17 14:45:58 Main Document

Debtor 1 Fauss, Kara Pg 30 of 37 Case number (if known)

| 8.  | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosign                             |                            | ments or transfer ar   | ny property on acc    | count of a del             | ot that benefited an         |
|-----|--|----------------------------|------------------------|-----------------------|----------------------------|------------------------------|
|     | ■ No   |                            |                        |                       |                            |                              |
|     | ☐ Yes. List all payments to an insider   |                            |                        |                       |                            |                              |
|     | Insider's Name and Address   | Dates of payment           | Total amount paid      | Amount you still owe  | Reason for<br>Include cred | this payment<br>ditor's name |
| Par | t 4: Identify Legal Actions, Repossession  | s, and Foreclosures        |                        |                       |                            |                              |
| 9.  | Within 1 year before you filed for bankrupto<br>List all such matters, including personal injury of<br>and contract disputes.    |                            |                        |                       |                            |                              |
|     | ■ No □ Yes. Fill in the details.   |                            |                        |                       |                            |                              |
|     | Case title Case number   | Nature of the case         | Court or agency        |                       | Status of th               | ne case                      |
| 10. | Within 1 year before you filed for bankrupto<br>Check all that apply and fill in the details below                               |                            | erty repossessed, fo   | reclosed, garnish     | ed, attached,              | seized, or levied?           |
|     | <ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>   |                            |                        |                       |                            |                              |
|     | Creditor Name and Address  | Describe the Property      |                        | Date                  |                            | Value of the                 |
|     |  | Explain what happened      | d                      |                       |                            | property                     |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becan a No  Yes. Fill in the details.           |                            | uding a bank or fina   | ancial institution, s | set off any an             | nounts from your             |
|     | Creditor Name and Address  | Describe the action the    | e creditor took        | Date a taken          | action was                 | Amount                       |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes                                 |                            | erty in the possessio  | on of an assignee     | for the benefi             | it of creditors, a           |
| Par | t 5: List Certain Gifts and Contributions  |                            |                        |                       |                            |                              |
| 13. | Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.                                     | tcy, did you give any gift | s with a total value o | of more than \$600    | per person?                |                              |
|     | Gifts with a total value of more than \$600 person   | Describe the gifts         |                        | Dates<br>the gi       | you gave<br>fts            | Value                        |
|     | Person to Whom You Gave the Gift and Address:  |                            |                        |                       |                            |                              |
| 14. | Within 2 years before you filed for bankrup  ■ No  | tcy, did you give any gift | s or contributions w   | rith a total value of | more than \$               | 600 to any charity?          |
|     | Yes. Fill in the details for each gift or conti  |                            |                        |                       |                            |                              |
|     | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you          | u contributed          | Dates                 | you<br>ibuted              | Value                        |
| Par | t 6: List Certain Losses   |                            |                        |                       |                            |                              |

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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| Deb  | otor 1 Fauss, Kara   |                         | Pg                                       | 31 of 37   | Case nur   | mber (if known)   |   |
|--|--|-------------------------|--|--|------------|---|---|
|  | or gambling?   |                         |  |  |            |   |   |
|  | ■ No   |                         |  |  |            |   |   |
|  | Yes. Fill in the details.  |                         |  |  |            |   |   |
|  | Describe the property you lost and how the loss occurred   | Include                 | the amount that ir                       | coverage for the loss surance has paid. It is of Schedule A/B: | List pend  |   | Value of property<br>lost               |
| Par  | t 7: List Certain Payments or Transfer   |                         |  |  | -17        |   |   |
| Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition page. |  | uptcy, did<br>preparing | a bankruptcy pe                          | etition?   | •          |   | y to anyone you                         |
|  | ■ No □ Yes. Fill in the details.   |                         |  |  |            |   |   |
|  | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Y  | You                     | Description and transferred              | value of any prop  | erty       | Date payment or<br>transfer was<br>made                         | Amount of payment                       |
| 17.  | Within 1 year before you filed for bankru<br>promised to help you deal with your cree<br>Do not include any payment or transfer that   | ditors or               | to make payment                          |  |            | ay or transfer any propert                                      | y to anyone who                         |
|  | ■ No □ Yes. Fill in the details.   |                         |  |  |            |   |   |
|  | Person Who Was Paid<br>Address   |                         | Description and transferred              | value of any prop  | erty       | Date payment or<br>transfer was<br>made                         | Amount of<br>payment                    |
| 18.  | Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already listed.  No  Yes. Fill in the details. | ur busine<br>s made as  | ss or financial aft<br>security (such as | airs?  |            |   |   |
|  | Person Who Received Transfer Address   |                         | Description and property transfe         |  | payn       | cribe any property or<br>nents received or debts<br>in exchange | Date transfer was made                  |
|  | Person's relationship to you   |                         |  |  | paiu       | in exchange   |   |
| 19.  | Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details.  |                         |  | ny property to a s   | elf-settle | d trust or similar device of                                    | which you are a                         |
|  | Name of trust  |                         | Description and                          | value of the prop  | erty trans | sferred   | Date Transfer was made                  |
| Par  | t 8: List of Certain Financial Accounts  | s, Instrume             | ents, Safe Depos                         | it Boxes, and Stora  | age Units  | 3   | made                                    |
|  | Within 1 year before you filed for bankru<br>sold, moved, or transferred?<br>Include checking, savings, money marke<br>houses, pension funds, cooperatives, as   | uptcy, wer              | re any financial a                       | ccounts or instrun   | nents he   | ld in your name, or for you                                     |   |
|  | ■ No □ Yes. Fill in the details.   |                         |  |  |            |   |   |
|  | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)   |                         | t 4 digits of<br>ount number             | Type of accou<br>instrument                                    | nt or      | Date account was closed, sold, moved, or transferred            | Last balance before closing or transfer |

Case 17-41812 Doc 1 Filed 03/20/17 Entered 03/20/17 14:45:58 Main Document Pg 32 of 37 Debtor 1 Case number (if known) Fauss, Kara 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Describe the contents Name of Financial Institution Who else had access to it? Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Nο Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Owner's Name Describe the property Value Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Governmental unit Environmental law, if you Date of notice Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material?

No

Name of site

Yes. Fill in the details.

Address (Number, Street, City, State and

Environmental law, if you

know it

Governmental unit

ZIP Code)

Date of notice

Address (Number, Street, City, State and ZIP Code)

Pg 33 of 37 Case number (if known) Debtor 1 Fauss, Kara 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: Fauss Consulting 1412 Heritage Valley Dr From-To High Ridge, MO 63049-1166 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kara Fauss Kara Fauss Signature of Debtor 2 Signature of Debtor 1 Date March 20, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

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Main Document

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-41812

B2030 (Form 2030) (12/15)

#### **United States Bankruptcy Court** Eastern District of Missouri, St. Louis Division

| In re        | Fauss, Kara   |                                  | Case No.                 |                               |         |
|--------------|---|----------------------------------|--------------------------|-------------------------------|---------|
|              |   | Debtor(s)                        | Chapter                  | 13                            |         |
|              | DISCLOSURE OF COMP  | ENSATION OF ATT                  | ORNEY FOR DI             | EBTOR                         |         |
| (            | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filibe rendered on behalf of the debtor(s) in contemplation  | ing of the petition in bankrupto | y, or agreed to be paid  | to me, for services rendered  | l or to |
|              | For legal services, I have agreed to accept   |                                  | \$                       | 0.00                          |         |
|              | Prior to the filing of this statement I have received   |                                  | \$                       | 0.00                          |         |
|              | Balance Due   |                                  | \$                       | 0.00                          |         |
| 2.           | The source of the compensation paid to me was:  |                                  |                          |                               |         |
|              | ■ Debtor □ Other (specify):   |                                  |                          |                               |         |
| 3.           | The source of compensation to be paid to me is:   |                                  |                          |                               |         |
|              | ■ Debtor □ Other (specify):   |                                  |                          |                               |         |
| 4.           | ■ I have not agreed to share the above-disclosed comfirm.   | pensation with any other perso   | on unless they are memb  | pers and associates of my la  | .W      |
|              | ☐ I have agreed to share the above-disclosed compensor copy of the agreement, together with a list of the na  |                                  |                          |                               | n. A    |
| 5.           | In return for the above-disclosed fee, I have agreed to r   | ender legal service for all aspe | ects of the bankruptcy c | ase, including:               |         |
| 1            | <ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, sta</li> <li>c. Representation of the debtor at the meeting of credit</li> <li>d. [Other provisions as needed]</li> </ul> | tement of affairs and plan whi   | ch may be required;      |                               | ;       |
| <b>6</b> . ] | By agreement with the debtor(s), the above-disclosed for  | ee does not include the followi  | ng service:              |                               |         |
|              |   | CERTIFICATION                    |                          |                               |         |
|              | I certify that the foregoing is a complete statement of a bankruptcy proceeding.  | ny agreement or arrangement f    | or payment to me for re  | epresentation of the debtor(s | s) in   |
| N            | March 20, 2017  | /s/ Jason Fauss                  |                          |                               |         |
| D            | Date  | Jason Fauss Signature of Attorn  | a a v                    |                               |         |
|              |   |                                  | - Attorney at Law        |                               |         |
|              |   | 11965 Saint Cha                  | rles Rock Rd Ste 20      | 2                             |         |
|              |   | Bridgeton, MO 6                  | 3044-2628                |                               |         |
|              |   | (314) 291-8899<br>jason@fausslaw | Fax: (314) 739-1355      |                               |         |
|              |   | Name of law firm                 |                          |                               |         |

Chase Bank USA PO Box 15298 Wilmington, DE 19850-5298

Chase Home Finance 3415 Vision Drive Columbus, OH 43219-6009

Dell Financial Services P.O. Box 81577 Austin, TX 59446-0000

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Missouri Department Of Revenue P.O. Box 475 Bankruptcy Unit Jefferson City, MO 65101-0000

Santander Consumer USA PO Box 961245 Fort Worth, TX 76161-0244

South And Associates 13160 Foster St Ste 100 Overland Park, KS 66213-2848 Wells Fargo Dealer Services P.O. Box 168048 Irving, TX 75016-8048

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| IN RE:      |           | Case No    |
|-------------|-----------|------------|
| Fauss, Kara |           | Chapter 13 |
|             | Debtor(s) | •          |

#### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

| Date: March 20, 2017 | Signature: /s/ Kara Fauss Kara Fauss | Debto               |
|----------------------|--------------------------------------|---------------------|
| Date:                | Signature:                           | Joint Debtor, if an |